

PATENTAttorney Docket No.: ICC-241/255/PCT/US

COMBINED DECLARATION AND POWER OF ATTORNEY
(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION OR CIP)

As a below-named inventor, I hereby declare that:

TYPE OF APPLICATION

This application is of the following type:

- original
- design
- supplemental
- national stage of PCT
- divisional
- continuation
- continuation-in-part (CIP)

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (*if only one name is listed below*) or an original, first and joint inventor (*if plural names are listed below*) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

AN APPARATUS FOR THE APPLICATION OF A CURABLE COMPOSITION TO A FASTENER AND CURABLE COMPOSITIONS SUITABLE FOR APPLICATION TO A FASTENER

SPECIFICATION IDENTIFICATION

the specification of which:

- (a) is filed concurrently herewith.
- (b) was filed on _____ as Application No. _____ or Express Mail Mailing Label No. _____, as Application No. not yet known, and was amended on _____ (*if applicable*).
- (c) was described and claimed in PCT International Application No. PCT/IE03/00122 filed on November 9, 2003 and as amended under PCT Article 19 on _____ (*if any*).

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations § 1.56(a).

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PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of any foreign application(s) for patent or inventor's certificate, § 119(e) of any United States provisional application, or § 365(b) of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(d) no such applications have been filed.
(e) such applications have been filed as follows:

**EARLIEST FOREIGN APPLICATION(S), IF ANY, FILED WITHIN 12 MONTHS
(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION**

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
PCT	PCT/IE03/00122	11.09.2003	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s); or § 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, § 112.

(f) no such applications have been filed.
(g) such applications have been filed as follows:

APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 120

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Steven C. Bauman
Reg. No. 33,832
HENKEL CORPORATION
1001 Trout Brook Crossing
Rocky Hill, Connecticut 06067 USA

SEND CORRESPONDENCE TO:	DIRECT TELEPHONE CALLS TO: <i>(name and telephone number)</i>
HENKEL CORPORATION Legal Department 1001 Trout Brook Crossing Rocky Hill, Connecticut 06067	Steven C. Bauman (860) 571-5001

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**COMBINED DECLARATION
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DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURES

Full name of sole or first inventor: Matthias Haller

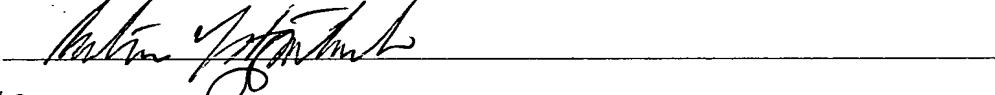
Inventor's signature: 

Date: _____ Country of Citizenship: Germany

Residence: Wiesenfeldstrasse 11, 65936 Frankfurt, Germany

Post Office Address: Same as above

2-00
Full name of second inventor: Martin J. Fitzpatrick

Inventor's signature: 

Date: 24/2/2005 Country of Citizenship: Ireland

Residence: 47 Westfield Road, Harolds Cross, Dublin 6W, Ireland IE X

Post Office Address: Same as above

2-00
Full name of third inventor: Fergal A. Gordon

Inventor's signature: 

Date: 24/2/2005 Country of Citizenship: Ireland

Residence: 10 The Paddocks, Naas, Co. Kildare, Ireland IE X

Post Office Address: Same as above

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**COMBINED DECLARATION
AND POWER OF ATTORNEY**

Attorney Docket No.: ICC-241/255/PCT/US

4-cc

Full name of fourth inventor: Karen O'Flynn

Inventor's signature: Karen O'Flynn

Date: 24/2/05 Country of Citizenship: Ireland

Residence: 42 Foxborough Avenue, Lucan, Co. Dublin, Ireland IE X

Post Office Address: Same as above

5-w

Full name of fifth inventor: Peter Wrobel

Inventor's signature: Peter Wrobel

Date: 24/2/2005 Country of Citizenship: U.K.

Residence: 4, Templeroan Crescent, Templeogue, Dublin 16, Ireland IE X

Post Office Address: Same as above

Full name of six inventor:

Inventor's signature:

Date: _____ Country of Citizenship: _____

Residence: _____

Post Office Address: _____

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